

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <u>09827592</u>		FILING DATE			
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	1							51			
2	1							52			
3	1							53			
4	1							54			
5	1							55			
6	1							56			
7	1							57			
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15	1							65			
16	1							66			
17	1							67			
18	1							68			
19	1							69			
20	1	2						70			
21								71			
22								72			
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43								93			
44								94			
45								95			
46								96			
47								97			
48								98			
49								99			
50								100			
TOTAL IND.	2							TOTAL IND.			
TOTAL DEP.	18							TOTAL DEP.			
TOTAL CLAIMS	20							TOTAL CLAIMS			

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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